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FROM • W. John Keyes  
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**Please Deliver to  
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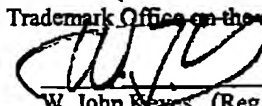
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/009,021	
	Filing Date	March 19, 2002	
	First Named Inventor	Tadashi Ishibashi	
	Group Art Unit	1774	
	Examiner Name	Camie S. Thompson	
Total Number of Pages in This Submission	38	Attorney Docket Number	09793822-0158

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is Response to Office Action of December 13, 2004.						
<input checked="" type="checkbox"/> Transmitted herewith is Terminal Disclaimer To Obviate A Double Patenting Rejection Over A Prior Patent						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	31	-	61	0	<input type="checkbox"/> x \$9.00 <input type="checkbox"/> x \$18.00	\$0
INDEPENDENT CLAIMS	3	-	3	0	<input type="checkbox"/> x \$42.00 <input checked="" type="checkbox"/> x \$86.00	\$0
APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$140.00 <input type="checkbox"/> x \$280.00 ONE TIME	\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0	
<input checked="" type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated December 13, 2004 by two month(s) for a fee of \$450.00 so that the period for response is extended to May 13, 2005 under 37 C.F.R. § 1.321.						
<input checked="" type="checkbox"/> The amount of \$130.00 for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed fee sheet.						
<input type="checkbox"/> The amount of \$_____ for the Amendment under 37 C.F.R. § 1.312(b) is included in the enclosed check.						
<input checked="" type="checkbox"/> The enclosed credit card payment form to charge the amount of \$580.00.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						

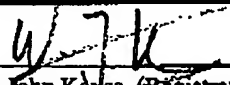
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14. <input checked="" type="checkbox"/> Customer No. 26263	 W. John Keyes, (Registration No. 54,218)
Dated: June 10, 2005	


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Dated: June 10, 2005	 W. John Keyes, (Registration 54,218)

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